FORM D

SEC Mail Processing Section

JUL 23 2008

Washington, DC

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	110							
OMB APPROVAL								
OMB Numb		3235-						
Expires: Estimated a	July 3	31.20	80					
Estimated a	verage	burde	n					
hours per response16.00								

SEC USE ONLY								
Prefix		Serial						
DATE RECEIVED								

Name of Offering (check if this is an an	nendment and name has changed, and indicate change.)	
J & K Property Holdings, LLC \$100,000 Filing Under (Check box(es) that apply): Type of Filing: New Filing Amer	Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the	e issuer	08052839
Name of Issuer (check if this is an amen J & K Property Holdings, LLC	dment and name has changed, and indicate change.)	. —
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
212 Main Street West	New Prague, MN 56071	952-758-4502
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
Owns and leases a commercial hotel pr	operty located in New Prague, Minnesota	PROCESSED
Actual or Estimated Date of Incorporation or C	limited partnership, to be formed Minnesota I Month Year	JUL 282008 Specify): imited tiability comparison REUTERS mated ::
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering. 77d(6).	of securities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
and Exchange Commission (SEC) on the earlie	than 15 days after the first sale of securities in the offering or of the date it is received by the SEC at the address given b United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange	Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice photocopies of the manually signed copy or be	e must be filed with the SEC, one of which must be manual ar typed or printed signatures.	ly signed. Any copies not manually signed must be
	tain all information requested. Amendments need only report any material changes from the information previously supp	
Filing Fee: There is no federal filing fee.		
ULOE and that have adopted this form. Issu are to be, or have been made. If a state requ	on the Uniform Limited Offering Exemption (ULOE) for sees relying on ULOE must file a separate notice with the stress the payment of a fee as a precondition to the claim for led in the appropriate states in accordance with state law.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

filing of a federal notice.

		A. BASIC IDE	NTII	FICATION DATA				
2. Enter the information requested	for the followin	g:						
 Each promoter of the issue 	r, if the issuer h	as been organized wi	ithin (the past five years;				
Each beneficial owner having	ng the power to v	ote or dispose, or dir	ect th	e vote or disposition	of, 10	% or more o	f a clas	s of equity securities of the issuer.
Each executive officer and								
Each general and managing				5				
		· _						
Check Box(es) that Apply: P	romoter 📝	Beneficial Owner	Ø	Executive Officer	√	Director		General and/or Managing Partner
Full Name (Last name first, if individ John A. Schumacher	lual)		· · · ·					
Business or Residence Address (Nu 107 Second Avenue SW, New F			de)		_,		-	
Check Box(es) that Apply: P	romoter 🔽	Beneficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, if individ Kathleen M. Schumacher	lual)	<u> </u>					•	
Business or Residence Address (Nu	mher and Street	, City, State, Zip Co	de)	 				
107 Second Avenue SW, New Pr		•	ιι,					
	romoter	Beneficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, if individ James R. Morris	lual)					<u> </u>		
Business or Residence Address (Nu	mber and Street	. City, State, Zip Co	de)	<u> </u>				
303 Columbus Avenue South, Ne			,					
	romoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individ	lual)							
Business or Residence Address (Nu	mber and Street	, City, State, Zip Co	de)					
Check Box(es) that Apply: P	romoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individ	lual)							
Business or Residence Address (Nu	mber and Street	, City, State, Zip Co	de)					
Check Box(es) that Apply: P	romoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individ	ual)	<u> </u>				.		
Business or Residence Address (Nu	mber and Street	, City, State, Zip Co	de)					
Check Box(es) that Apply: PI	romoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individ	lual)							
Business or Residence Address (Nu	mber and Street	, City, State, Zip Coo	de)					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. II	NFORMAT	ION ABOU	T OFFERI	NG				
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No		
				Ans	wer also ir	Appendix	, Column 2	, if filing i	under ULC	E.			
2.	What is	the minim	um investn	nent that w	ill be acce	pted from a	any individ	lual?		***************************************	••••••••	Ψ	00.00
3.	3. Does the offering permit joint ownership of a single unit?											Yes	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)													
Ful	ll Name (Last name	first, if ind	ividual)									
Bu	Business or Residence Address (Number and Street, City, State, Zip Code)												
Na	me of As	sociated Br	oker or De	aler	_								
Sta	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers				. <u>. </u>		-
	(Check	"All States	or check	individual	States)		.,,,,,,,,,			***************************************	***************************************	☐ AI	l States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)						_			
Bu	sincss or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)				·		
Na	mc of As	sociated Br	oker or De	aler		<u> </u>							
Sta	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)				***************************************	•••••	••••••	□ AI	l States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bu	sincss or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)						
Na	me of As	sociated Br	oker or De	aler									<u> </u>
Sta	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)	***************************************		***************************************		***************************************		☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	:	Amount Already Sold
	Debt	\$		\$
	Equity		_	\$ 0.00
	✓ Common Preferred			
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests			\$
	Other (Specify)	<u></u> -	_	\$
	Total			\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	0		\$_0.00
	Non-accredited Investors	0	_	\$_0.00
	Total (for filings under Rule 504 only)	0		\$_0.00
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 303	0	_	\$ <u>0.00</u>
	Regulation A	0	_	\$_0.00
	Rule 504	0	_	\$_0.00
	Total		_	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	[\$
	Printing and Engraving Costs			\$
	Legal Fees		Z	\$_5,000.00
	Accounting Fees	[\$
	Engineering Fees			s
	Sales Commissions (specify finders' fees separately)	[<u> </u>
	Other Expenses (identify)	[\$
	Total	[Z	\$_5,000.00

	C. OFFERING PRIC	TE' NAMREK	OF INVESTO	JRS, EXPEN	SES AND USE OF	PR	OCEEDS		
	b. Enter the difference between the aggreg and total expenses furnished in response to P proceeds to the issuer."	Part C - Ques	stion 4.a. This	s difference i	s the "adjusted gro	SS		\$ ⁹	5,000.00
i.	Indicate below the amount of the adjusted a each of the purposes shown. If the amount check the box to the left of the estimate. The proceeds to the issuer set forth in respons	int for any pu ne total of the p	rpose is not l payments list	known, furn ed must equi	ish an estimate ar	nđ			
							Payments to Officers, Directors, & Affiliates	1	Payments to Others
	Salaries and fees	•••••	*****************	••••••	.,	🔲	\$	\$	
	Purchase of real estate		***************************************			🔲	\$	\$	
	Purchase, rental or leasing and installation and equipment	on of machine	ry				c		
	Construction or leasing of plant buildings					_		_	
						∐	<u></u>	. []3	
	Acquisition of other businesses (including offering that may be used in exchange for	r the assets or	r securities of	f another		_	•		
	issuer pursuant to a merger)							_	
	Repayment of indebtedness								
	Working capital					_			95,000.00
	Other (specify):					- 🗆	\$. [] \$	
					-	🗆	\$	\$	<u></u>
	Column Totals		***************************************			🔲	\$_0.00	. 🗆 \$	95,000.00
	Total Payments Listed (column totals add	led)	******			\$ 95,000.00			00
_		Ε	D. FEDERAL	SIGNATU	RE				
ig	e issuer has duly caused this notice to be signe nature constitutes an undertaking by the issu- information furnished by the issuer to any	uer to furnish	to the U.S. S	ecurities and	d Exchange Comm	nissi	on, upon writte		
ss	ucr (Print or Type)	Sig	gnature			Da	(c)		
) (& K Property Holdings, LLC				Alas	1/	17/5/0	15	
	me of Signer (Print or Type)	Tit	lc of Signer ((Print or Ty	c ////	1/	1/2-		
oh	n A. Schumacher	Pre	esident & Ch	ief Manage	X [[]] [V/[1/6		

- ATTENTION ----

	E. STATE SIGNATURE	Yes No	
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?		
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature / Date
J & K Property Holdings, LLC	1/5/08
Name (Print or Type)	Title (Print or Type)
John A. Schumacher	President & Chief Manager

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 1 4 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of offered in state investors in State amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Yes No State Investors **Investors** Yes Amount Amount No AL ΑK AZAR $\mathsf{C}\mathsf{A}$ CO CT DE DC FL GA HI ID ΙL IN ĪΑ KS KY LA ME MD MA ΜI \$100,000 Equity \$0.00 \$0.00 MN 0 0 X X MS X

1 2 3 4 5 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of offered in state waiver granted) investors in State amount purchased in State (Part C-Item 1) (Part B-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount **Investors Amount** Yes No MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RΙ SCSDTNTXUT VT VA WA WV WI

APPENDIX

APPENDIX										
1		2	3		4					
	to non-a	i to sell accredited as in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULO (if yes, attach explanation of waiver granted (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY					-					
PR										

